



Docket No. 1359.1023

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Shoji HAYAKAWA, et al.

Serial No.: 09/487,467

Group Art Unit: 2787

Filed: January 19, 2000

For: SPEAKER VERIFICATION APPARATUS AND METHOD

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

It is requested that the Foreign Applications information be added on the Official Filing Receipt. The correct Foreign Application information is -- **Japan 11-94734 1/4/99** -- as is evidenced by the Declaration attached to the application as filed. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the errors have been noted in red.

It is requested that a corrected Official Filing Receipt be issued in this application.

Respectfully submitted,

STAAS & HALSEY LLP

By: _____

H. J. Staas

Registration No. 22,010

700 Eleventh Street, N.W.
Washington, D.C. 20001
(202) 434-1500

Date: _____

April 4, 2000

RECEIVED
APR 19 2000
TC 2700 MAIL ROOM

RECEIVED
JUL - 12 2000
TECH CENTER 2700

FILING RECEIPT



OC000000004986131

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/487,467	01/19/2000	2787	690	1359.1023	12	JC 2700 MAIL ROOM	3

Staas & Halsey
700 Eleventh Street NW
Suite 500
Washington, DC 20001

Date Mailed: 03/08/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Shoji Hayakawa, Kanagawa, JAPAN ;
Fumitada Itakura, Aichi, JAPAN ;
Kazuya Takeda, Aichi, JAPAN ;

Continuing Data as Claimed by Applicant

Foreign Applications JAPAN 11-94734

1/4/99

Foreign filing license granted on 03/08/2000

Title

Speaker Verification Apparatus And Method

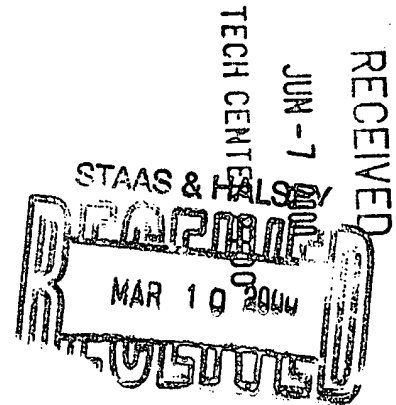
Preliminary Class

713

Data entry by : WYATT, DEBRA

Team : OIPE

Date: 03/08/2000





Bib Data Sheet


**UNITED STATES DEPARTMENT OF
COMMERCE**
Patent and Trademark Office

 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

FILE COPY

SERIAL NUMBER 09/487,467	FILING DATE 01/19/2000 RULE -	CLASS 213 706	GROUP ART UNIT 2787 2121	ATTORNEY DOCKET NO. 1359.1023
APPLICANTS Shoji Hayakawa, Kanagawa, JAPAN; Fumitada Itakura, Aichi, JAPAN; Kazuya Takeda, Aichi, JAPAN;				
** CONTINUING DATA ***** <i>KB</i>				
** FOREIGN APPLICATIONS ***** <i>KB</i> JAPAN 11-94734 01/04/1999				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/08/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 12	TOTAL CLAIMS 6
				INDEPENDENT CLAIMS 3
ADDRESS Staas & Halsey 700 Eleventh Street NW Suite 500 Washington, DC 20001				
TITLE Speaker Verification Apparatus And Method				
FILING FEE RECEIVED 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

 RECEIVED
 APR 19 2000
 TC 2700 MAIL ROOM

 RECEIVED
 JUN -7 2000
 TECH CENTER 2700